PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Ар	Application or Docket Number			
									10				
		CLAIMS	AS FILED -				SMALL ENT		TITY	OR	OTHER THAN SMALL ENTITY		
<del>                                     </del>	O MATIONAL		(Colum	nn 1)	<del></del>	(Column 2)	7	·····	<del></del>	<b>7</b>		EMILL	
-		STAGE FEES	<del>- </del>		ļ	<del></del>	11	RATE	FEE		RATE	FEE	
BASIC FEE				SMALL ENT. = \$ 150		RGE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	13/1	
EXAMINATION FEE				Satisfies PCT-Article 33(1)- (4) = \$50 / \$100		other situations = \$ 100 / \$ 200		EXAM. FEE		7	EXAM. FEE	11/1	
SEARCH FEE			ALL other cou	U.S. Is ISA = \$50/\$100 ALL other countries = \$200/\$400		other situations = \$ 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	4/1	
FEE	E FOR EXTRA	SPEC. PGS.	min	minus 100 =		/ 50 <b>=</b>		X \$ 125 =		7	X \$ 250 =	1	
TOTAL CHARGEABLE CLAIMS			18 mi	inus 20 =	*			X \$ 25 =		OR	X \$ 50 =	1	
 IND	DEPENDENT CL	LAIMS	1	migus 3 = .				X \$ 100 =	<del>                                     </del>	OR	X \$ 200 =	<del> </del>	
MUI	LTIPLE DEPEN	IDENT CLAIM PR	RESENT					+ \$ 180 =		OR	+ \$ 360 =	<del> </del>	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	<del> </del>	OR	TOTAL	11/1	
				<u>.                                    </u>		•			L	_		July	
		(Column 1)	AMENDED	PART (Colum		(Column 3)		SMALLE	ENTITY	OR	OTHER SMALL E		
		CLAIMS REMAINING		HIGHE	EST	PRESENT	Γ		ADDI-	-		ADDI-	
MTA		AFTER AMENDMENT		PREVIOU PAID F	USLY	EXTRA	L	RATE	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=	Γ	X \$ 25 =		OR	X \$ 50 =		
MEN	Independent	*	Minus	***		=	ľ	X \$ 100 =	_	OR.	X \$ 200 =		
_	FIRST PRES	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					1	+ \$ 180 =		OR	+ \$ 360 =		
	<u></u>			<del></del>			· <b>L</b>	OTAL ADDIT.	<del></del>	OR	TOTAL ADDIT.		
*		•						FEE (	<del></del>	1	FEE	<del></del>	
_	r <del></del>	(Column 1)	т	(Columi	<u></u>	(Column 3)	_	·····		. г		******************************	
a E		REMAINING - AFTER - AMENDMENT		NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
AMENDMENT	Independent	*	Minus	***		=	1	X \$ 100 =		OR	X \$ 200 =		
<b>`</b> [	FIRST PRESI	ENTATION OF M	IULTIPLE DEPE	NDENT CI	AIM			+ \$ 180 =		OR	+ \$ 360 =	<del></del>	
<u>_</u> L	<del></del>						Ŀ	OTAL ADDIT.		' . L	TOTAL ADDIT.	<del>-</del>	
			•			•		FEE L		•	FEE L	<del></del>	
	•									,			
*	if the entry in colur	mn 1 is less than the	a entry in column 2.	, write "0" in	column	3.							
	/ Me "Highest Nu	mber Previously Paid mber Previously Paid	1 FOR IN I HID OFF	ACE 18 1685 u	/lan ∠∪	, enter "zo",	•						